

**COMPARISON OF FISCAL IMPACTS OF REGULAR POLICY CHANGES
NOVEMBER 2006 ESTIMATE COMPARED TO APPROPRIATION
FISCAL YEAR 2006-07**

NO.	POLICY CHANGE TITLE	2006-07 APPROPRIATION		NOV. 2006 EST. FOR 2006-07		DIFFERENCE	
		TOTAL FUNDS	STATE FUNDS	TOTAL FUNDS	STATE FUNDS	TOTAL FUNDS	STATE FUNDS
	<u>ELIGIBILITY</u>						
1	FAMILY PLANNING INITIATIVE	\$457,301,000	\$148,956,600	\$446,576,000	\$145,463,500	-\$10,725,000	-\$3,493,100
2	BREAST AND CERVICAL CANCER TREATMENT	\$77,895,000	\$33,003,950	\$73,147,000	\$32,495,350	-\$4,748,000	-\$508,600
3	REDETERMINATION FORM SIMPLIFICATION	\$37,387,520	\$18,693,760	\$36,504,640	\$18,252,320	-\$882,880	-\$441,440
4	CHDP GATEWAY - PREENROLLMENT	\$17,303,000	\$6,056,050	\$17,549,000	\$6,142,150	\$246,000	\$86,100
5	BRIDGE TO HFP	\$5,217,000	\$1,825,950	\$7,418,000	\$2,596,300	\$2,201,000	\$770,350
6	SHIFT OF CCS STATE/COUNTY COSTS TO MEDI-CAL	\$5,000,000	\$2,500,000	\$5,000,000	\$2,500,000	\$0	\$0
7	ELIG. FOR CHILDREN IN MONTH PRIOR TO SSI/SSP GR	\$1,240,540	\$620,270	\$1,595,010	\$797,500	\$354,470	\$177,240
8	MEDI-CAL/HF BRIDGE PERFORMANCE STANDARDS	\$1,110,790	\$388,770	\$1,002,590	\$350,910	-\$108,190	-\$37,870
9	MEDI-CAL TO HFP ACCELERATED ENROLLMENT	\$5,667,530	\$1,983,640	\$322,220	\$112,780	-\$5,345,310	-\$1,870,860
10	BCCTP RETROACTIVE COVERAGE	\$744,260	\$260,490	\$256,240	\$89,680	-\$488,020	-\$170,810
12	HURRICANE KATRINA SECTION 1115 WAIVER	\$0	-\$2,318,000	\$0	-\$505,000	\$0	\$1,813,000
13	RESOURCE DISREGARD - % PROGRAM CHILDREN	\$0	-\$15,046,950	\$0	-\$16,581,150	\$0	-\$1,534,200
14	REFUGEES	\$0	-\$2,712,000	\$0	-\$2,371,000	\$0	\$341,000
15	NEW QUALIFIED ALIENS	\$0	\$170,898,500	\$0	\$159,536,500	\$0	-\$11,362,000
16	ACCELERATED ENROLLMENT-SCHIP TITLE XXI	\$0	\$0	\$0	\$0	\$0	\$0
	ELIGIBILITY SUBTOTAL	\$608,866,630	\$365,111,030	\$589,370,700	\$348,879,840	-\$19,495,930	-\$16,231,190
	<u>BENEFITS</u>						
17	ADULT DAY HEALTH CARE - CDA	\$415,187,730	\$207,593,870	\$359,821,000	\$179,910,500	-\$55,366,730	-\$27,683,370
18	LOCAL EDUCATION AGENCY (LEA) PROVIDERS	\$153,000,000	\$0	\$153,000,000	\$0	\$0	\$0
19	MULTIPURPOSE SENIOR SERVICES PROGRAM-CDA	\$47,515,000	\$22,258,000	\$50,516,000	\$25,258,000	\$3,001,000	\$3,000,000
20	CONLAN V. BONTA	\$27,971,580	\$13,985,790	\$9,814,400	\$4,907,200	-\$18,157,180	-\$9,078,590
21	HUMAN PAPILLOMAVIRUS VACCINE	\$0	\$0	\$3,797,890	\$1,898,950	\$3,797,890	\$1,898,950
22	PRENATAL SCREENING EXPANSION	\$0	\$0	\$3,159,650	\$1,579,820	\$3,159,650	\$1,579,820
23	NF A/B WAIVER GROWTH	\$0	\$0	\$1,309,260	\$654,630	\$1,309,260	\$654,630

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	<u>BENEFITS</u>						
24	DENTAL RESTORATION DOCUMENTATION REQUIREME	\$0	\$0	\$1,001,000	\$500,500	\$1,001,000	\$500,500
25	GENETIC DISEASE TESTING FEE INCREASE	\$0	\$0	\$940,820	\$470,410	\$940,820	\$470,410
26	FLUORIDE VARNISH	\$3,951,220	\$1,975,610	\$920,000	\$460,000	-\$3,031,220	-\$1,515,610
27	ELIMINATION OF PODIATRY TARS	\$200,000	\$100,000	\$119,850	\$59,930	-\$80,150	-\$40,080
28	NEW SERVICES FOR NF A/B, SUBACUTE & IHMC WAIVE	\$0	\$0	\$67,090	\$33,540	\$67,090	\$33,540
32	FAMILY PACT STATE ONLY SERVICES	\$0	\$0	\$0	\$2,500,000	\$0	\$2,500,000
33	CLPP FUNDING FOR EPSDT LEAD SCREENS	\$0	\$0	\$0	\$0	\$0	\$0
34	SCHIP FUNDING FOR PRENATAL CARE	\$0	-\$94,144,700	\$0	-\$112,063,900	\$0	-\$17,919,200
35	CDSS SHARE OF COST PAYMENT FOR IHSS	\$0	\$5,418,500	\$0	\$5,362,500	\$0	-\$56,000
37	EXPANSION OF NF A/B WAIVER (SB 643)	\$0	\$0	-\$140,000	-\$70,000	-\$140,000	-\$70,000
38	\$1800 DENTAL CAP FOR ADULTS	-\$3,126,000	-\$1,563,000	-\$2,292,000	-\$1,146,000	\$834,000	\$417,000
--	ADULT DAY HEALTH CARE REFORMS	\$862,000	\$431,000	\$0	\$0	-\$862,000	-\$431,000
--	DENTAL HEALTH FOR CHILDREN	\$1,500,000	\$750,000	\$0	\$0	-\$1,500,000	-\$750,000
--	MEDI-CAL CONTINUATION OF PART D EXCLUDED	\$193,888,580	\$96,944,290	\$0	\$0	-\$193,888,580	-\$96,944,290
--	MEDICARE PART B DEDUCTIBLE INCREASE	\$29,823,600	\$14,911,800	\$0	\$0	-\$29,823,600	-\$14,911,800
--	MMA MEDICARE DRUG BENEFIT	-\$3,371,181,030	-\$1,685,590,510	\$0	\$0	\$3,371,181,030	\$1,685,590,510
	BENEFITS SUBTOTAL	-\$2,500,407,310	-\$1,416,929,350	\$582,034,960	\$110,316,080	\$3,082,442,260	\$1,527,245,430
	<u>PHARMACY</u>						
39	HIV/AIDS PHARMACY PILOT PROGRAM	\$4,218,000	\$2,109,000	\$0	\$4,224,500	-\$4,218,000	\$2,115,500
40	NON FFP DRUGS	\$0	\$536,000	\$0	\$938,000	\$0	\$402,000
42	MEDICAL SUPPLY CONTRACTING	-\$6,762,610	-\$3,381,310	-\$6,763,320	-\$3,381,660	-\$710	-\$350
43	ENTERAL NUTRITION PRODUCTS	-\$997,000	-\$498,500	-\$7,006,500	-\$3,503,250	-\$6,009,500	-\$3,004,750
44	NEW THERAPEUTIC CATEGORY REVIEWS/REBATES	-\$130,600,000	-\$65,300,000	-\$78,942,110	-\$39,471,050	\$51,657,900	\$25,828,950
45	AGED DRUG REBATE RESOLUTION	-\$15,000,000	-\$7,500,000	-\$12,000,000	-\$6,000,000	\$3,000,000	\$1,500,000

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		TOTAL FUNDS	STATE FUNDS	TOTAL FUNDS	STATE FUNDS	TOTAL FUNDS	STATE FUNDS
	PHARMACY						
46	FAMILY PACT DRUG REBATES	-\$18,134,000	-\$5,814,800	-\$30,207,000	-\$12,214,900	-\$12,073,000	-\$6,400,100
47	STATE SUPPLEMENTAL DRUG REBATES	-\$341,651,000	-\$170,293,900	-\$357,390,000	-\$178,139,000	-\$15,739,000	-\$7,845,100
48	FEDERAL DRUG REBATE PROGRAM	-\$768,172,000	-\$382,890,800	-\$768,626,000	-\$383,117,000	-\$454,000	-\$226,200
	PHARMACY SUBTOTAL	-\$1,277,098,610	-\$633,034,310	-\$1,260,934,920	-\$620,664,360	\$16,163,690	\$12,369,940
	MANAGED CARE						
52	MANAGED CARE INTERGOVERNMENTAL TRANSFERS	\$8,000,000	\$4,000,000	\$161,000,000	\$82,500,000	\$153,000,000	\$78,500,000
55	RESTORATION OF PROVIDER PAYMENT DECREASE	\$65,415,000	\$32,707,500	\$66,415,000	\$33,207,500	\$1,000,000	\$500,000
59	RISK PAYMENTS FOR MANAGED CARE PLANS	\$6,300,000	\$3,150,000	\$5,000,000	\$2,500,000	-\$1,300,000	-\$650,000
61	PACE RATES AT 90% OF UPL	\$2,206,000	\$1,103,000	\$3,348,000	\$1,674,000	\$1,142,000	\$571,000
62	CAPITATION RATE INCREASES	\$78,050,000	\$39,025,500	\$2,860,000	\$1,430,000	-\$75,190,000	-\$37,595,500
63	QUALITY IMPROVEMENT ASSESSMENT FEE	\$2,736,000	\$1,368,000	\$2,483,000	\$1,241,500	-\$253,000	-\$126,500
64	FFS COSTS FOR MANAGED CARE ENROLLEES	\$0	\$0	\$0	\$0	\$0	\$0
--	CAL OPTIMA 3% RATE INCREASE	\$22,402,000	\$11,222,500	\$0	\$0	-\$22,402,000	-\$11,222,500
--	MMA -- MANAGED CARE CAPITATION SAVINGS	-\$225,988,000	-\$112,994,000	\$0	\$0	\$225,988,000	\$112,994,000
--	PCCM AIDS HEALTHCARE FDN EXPANSION	\$1,616,000	\$808,000	\$0	\$0	-\$1,616,000	-\$808,000
--	SAN DIEGO COMMUNITY HEALTH GROUP AUGMENTAT	\$3,000,000	\$1,500,000	\$0	\$0	-\$3,000,000	-\$1,500,000
--	STANISLAUS 2-PLAN MODEL RECONVERSION	-\$14,135,000	-\$7,105,000	\$0	\$0	\$14,135,000	\$7,105,000
--	TWO-PLAN MODEL DEFAULT ALGORITHM	\$1,310,000	\$655,000	\$0	\$0	-\$1,310,000	-\$655,000
	MANAGED CARE SUBTOTAL	-\$49,088,000	-\$24,559,500	\$241,106,000	\$122,553,000	\$290,194,000	\$147,112,500
	PROVIDER RATES						
65	NF-B RATE CHANGES AND QA FEE	\$763,020,430	\$381,510,220	\$139,065,370	\$69,532,680	-\$623,955,060	-\$311,977,530
66	LTC RATE ADJUSTMENT	\$177,977,870	\$88,988,940	\$51,481,690	\$25,740,840	-\$126,496,180	-\$63,248,090
67	ANNUAL MEI INCREASE FOR FQHCS/RHCS	\$36,383,070	\$18,191,530	\$38,361,780	\$19,180,890	\$1,978,710	\$989,350
68	NON-CONTRACT HOSP. 10% INTERIM RATE RED.	\$42,523,000	\$21,261,500	\$14,883,000	\$7,441,500	-\$27,640,000	-\$13,820,000

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	<u>PROVIDER RATES</u>						
69	DME REIMBURSEMENT CHANGES	\$4,471,000	\$2,235,000	\$4,524,000	\$2,262,000	\$53,000	\$27,000
70	HOSPICE RATE INCREASES	\$15,887,240	\$7,943,620	\$4,405,590	\$2,202,800	-\$11,481,650	-\$5,740,820
71	MINIMUM WAGE INCREASE FOR LTC FACILITIES	\$0	\$0	\$2,530,690	\$1,265,340	\$2,530,690	\$1,265,340
	PROVIDER RATES SUBTOTAL	\$1,040,262,600	\$520,130,800	\$255,252,110	\$127,626,060	-\$785,010,490	-\$392,504,740
	<u>HOSPITAL FINANCING</u>						
74	HOSP FINANCING - DSH PMT	\$1,454,133,000	\$591,754,500	\$1,613,654,000	\$582,942,000	\$159,521,000	-\$8,812,500
75	HOSP FINANCING - SAFETY NET CARE POOL	\$633,169,000	\$0	\$593,848,000	\$0	-\$39,321,000	\$0
76	HOSP FINANCING - PRIVATE DSH REPLACEMENT	\$542,546,000	\$271,273,000	\$477,742,000	\$238,871,000	-\$64,804,000	-\$32,402,000
77	HOSP FINANCING - PRIVATE HOSPITAL SUPP PMT	\$246,742,000	\$123,371,000	\$318,696,000	\$159,348,000	\$71,954,000	\$35,977,000
78	HOSP FINANCING-DPH PHYSICIAN & NON-PHYSICIAN	\$96,763,000	\$0	\$98,767,000	\$0	\$2,004,000	\$0
79	HOSP FINANCING - CCS AND GHPP	\$72,453,000	\$0	\$72,581,000	\$0	\$128,000	\$0
80	HOSP FINANCING - DISTRESSED HOSPITAL FUND	\$53,680,000	\$26,840,000	\$57,696,000	\$28,848,000	\$4,016,000	\$2,008,000
81	HOSP FINANCING - DPH INTERIM RATE GROWTH	\$0	\$0	\$5,427,200	\$0	\$5,427,200	\$0
82	HOSP FINANCING - NDPH SUPPLEMENTAL PMT	\$3,818,000	\$1,909,000	\$3,998,000	\$1,999,000	\$180,000	\$90,000
85	HOSP FINANCING - STABILIZATION FUNDING	\$0	\$0	\$0	\$0	\$0	\$0
86	HOSP FINANCING - BCCTP	\$0	-\$692,310	\$0	-\$291,000	\$0	\$401,310
87	BASE ADJUSTMENT - DPH INTERIM RATE	\$0	\$0	\$0	-\$420,586,000	\$0	-\$420,586,000
88	HOSP FINANCING - MIA LTC	\$0	-\$24,031,000	\$0	-\$7,328,000	\$0	\$16,703,000
89	HOSP FINANCING - DPH RATE RECONCILIATION	-\$65,232,000	-\$65,232,000	-\$30,528,000	-\$30,528,000	\$34,704,000	\$34,704,000
	HOSPITAL FINANCING SUBTOTAL	\$3,038,072,000	\$925,192,190	\$3,211,881,200	\$553,275,000	\$173,809,200	-\$371,917,190
	<u>SUPPLEMENTAL PMNTS.</u>						
90	CAPITAL PROJECT DEBT REIMBURSEMENT	\$101,012,000	\$50,506,000	\$133,691,000	\$66,845,500	\$32,679,000	\$16,339,500
91	HOSPITAL OUTPATIENT SUPPLEMENTAL PAYMENT	\$130,000,000	\$0	\$120,000,000	\$0	-\$10,000,000	\$0
92	IGT FOR NON-SB 1100 HOSPITALS	\$0	\$0	\$100,000,000	\$50,000,000	\$100,000,000	\$50,000,000

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	<u>SUPPLEMENTAL PMNTS.</u>						
93	FFP FOR LOCAL TRAUMA CENTERS	\$24,000,000	\$12,000,000	\$65,000,000	\$32,500,000	\$41,000,000	\$20,500,000
94	CERTIFICATION PAYMENTS FOR DP-NFS	\$36,000,000	\$0	\$37,000,000	\$0	\$1,000,000	\$0
95	DSH OUTPATIENT PAYMENT METHOD CHANGE	\$10,000,000	\$5,000,000	\$10,000,000	\$5,000,000	\$0	\$0
96	SRH OUTPATIENT PAYMENT METHOD CHANGE	\$8,000,000	\$4,000,000	\$8,000,000	\$4,000,000	\$0	\$0
97	DSH PAYMENTS	\$0	\$0	\$2,209,000	\$1,104,500	\$2,209,000	\$1,104,500
	SUPPLEMENTAL PMNTS. SUBTOTAL	\$309,012,000	\$71,506,000	\$475,900,000	\$159,450,000	\$166,888,000	\$87,944,000
	<u>OTHER</u>						
110	HEALTHY FAMILIES - CDMH	\$16,998,000	\$0	\$40,394,000	\$0	\$23,396,000	\$0
111	NURSE-TO-PATIENT RATIOS FOR HOSPITALS	\$14,682,000	\$7,341,000	\$14,682,000	\$7,341,000	\$0	\$0
114	MINOR CONSENT SETTLEMENT	\$9,467,000	\$9,467,000	\$9,467,000	\$9,467,000	\$0	\$0
116	ANTI-FRAUD BIC CLAIMS REPROCESSING	\$9,808,000	\$4,904,000	\$7,084,000	\$3,542,000	-\$2,724,000	-\$1,362,000
118	TWO-PLAN MODEL NOTICES OF DISPUTE	\$1,000,000	\$1,000,000	\$1,000,000	\$1,000,000	\$0	\$0
120	ESTATE RECOVERY REGULATIONS	\$701,000	\$350,500	\$691,000	\$345,500	-\$10,000	-\$5,000
121	FFP REPAYMENT-SPECIALTY MENTAL HEALTH	\$0	\$0	\$0	\$1,900,000	\$0	\$1,900,000
122	CIGARETTE AND TOBACCO SURTAX FUNDS	\$0	\$0	\$0	\$0	\$0	\$0
124	INDIAN HEALTH SERVICES	\$0	-\$5,511,000	\$0	-\$5,900,000	\$0	-\$389,000
125	ANTI-FRAUD EXPANSION FOR FY 2004-05	\$0	\$0	\$0	\$0	\$0	\$0
126	NON-INSTITUTIONAL PROVIDER OVERPAYMENTS	\$0	\$36,000,000	\$0	\$36,000,000	\$0	\$0
127	STATE-ONLY IMD ANCILLARY SERVICES	\$0	\$11,900,000	\$0	\$11,900,000	\$0	\$0
129	MEDICAL SUPPORT ENHANCEMENTS	-\$966,960	-\$483,480	-\$1,006,460	-\$503,230	-\$39,500	-\$19,750
130	GLAXOSMITHKLINE SETTLEMENT	\$0	\$0	-\$1,239,000	-\$1,239,000	-\$1,239,000	-\$1,239,000
131	EDS COST CONTAINMENT PROJECTS	-\$12,392,900	-\$5,926,510	-\$2,261,600	-\$1,130,800	\$10,131,300	\$4,795,710
132	NEW RECOVERY ACTIVITIES	-\$142,305,070	-\$71,152,530	-\$19,488,630	-\$9,744,310	\$122,816,440	\$61,408,220
133	ANTI-FRAUD EXPANSION FOR FY 2005-06	-\$133,698,980	-\$66,849,490	-\$125,087,000	-\$62,543,500	\$8,611,980	\$4,305,990

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	OTHER						
134	ANTI-FRAUD EXPANSION FOR FY 2006-07	-\$52,414,270	-\$26,207,140	-\$45,039,690	-\$22,519,850	\$7,374,580	\$3,687,290
--	5% PAYMENT DECREASE RESCISSION - SB 912	\$64,147,000	\$30,325,000	\$0	\$0	-\$64,147,000	-\$30,325,000
--	5% PROVIDER PAYMENT DECREASE - AB 1735	-\$66,078,000	-\$31,243,000	\$0	\$0	\$66,078,000	\$31,243,000
--	FAMILY PACT STERILIZATION POLICY	\$0	-\$2,000,000	\$0	\$0	\$0	\$2,000,000
--	FQHC RATE ADJUSTMENTS	\$25,177,190	\$12,588,600	\$0	\$0	-\$25,177,190	-\$12,588,600
--	HOSP FINANCING-DPH INTERIM PAYMENT	\$767,703,000	\$0	\$0	\$0	-\$767,703,000	\$0
--	HOSP FINANCING - INPATIENT BASE REDUCTION	-\$813,634,000	-\$406,817,000	\$0	\$0	\$813,634,000	\$406,817,000
--	INPATIENT PSYCHIATRIC CARE SAVINGS	-\$1,765,690	-\$1,765,690	\$0	\$0	\$1,765,690	\$1,765,690
--	NON-CONTRACT HOSPITAL AUDITS	-\$16,876,000	-\$8,438,000	\$0	\$0	\$16,876,000	\$8,438,000
--	ORTHOPAEDIC HOSPITAL - LAB SERVICES	\$14,594,000	\$7,297,000	\$0	\$0	-\$14,594,000	-\$7,297,000
--	OUT-OF-STATE HOSPITAL JUDGMENT	\$309,830	\$154,910	\$0	\$0	-\$309,830	-\$154,910
--	WEEKLY FORMULARY PRICING UPDATE	\$8,500,000	\$4,250,000	\$0	\$0	-\$8,500,000	-\$4,250,000
	OTHER SUBTOTAL	-\$307,044,840	-\$500,815,830	-\$120,804,370	-\$32,085,190	\$186,240,470	\$468,730,640
	GRAND TOTAL	\$862,574,470	-\$693,398,960	\$3,973,805,670	\$769,350,430	\$3,111,231,210	\$1,462,749,390

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